

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Transport Workers Union  
of America  
Air Transport Division  
80 W. End Ave.  
New York, NY 10023-6301

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

- ☐ Yes

## 2. Article Number

(Transfer from service)

7003 1680 0001 3384 6905

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES  
POSTAL SERVICE®

Click-N-Ship®

P

U.S. POSTAGE  
REQUIRED

USPS PRIORITY MAIL®

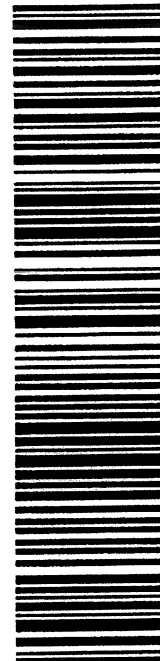
ORNTON DAVIDSON  
ERISA LAW GROUP  
55 SAN JOAQUIN ST  
ESNO CA 93721-1626

SHIP TO:  
TRANSPORT WORKERS UNION OF AMERICA  
AIR TRANSPORT DIVISION  
80 W END AVE

NEW YORK NY 10023-6301



ZIP - e/ USPS DELIVERY CONFIRMATION™



420 10023 9101 0385 5574 9197 1719 24

Electronic Rate Approved #038555749

## SENDER: COMPLETE THIS SECTION

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## 1. Article Addressed to:

Transport Workers Union  
of America  
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80 W. End Ave.  
New York, NY 10023-6301

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Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

RECEIVED DATE 11/24

MAIL ROOM

100 LOCAL 100

15

3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

- ☐ Yes

**PROOF OF SERVICE**

STATE OF CALIFORNIA)  
COUNTY OF FRESNO ) ss.

I, Jill A. Fulkes, certify and declare as follows:

I am a citizen of the United States and a resident of the County aforesaid; I am over the age of eighteen years and not a party to the within above entitled action; my business address is 2055 San Joaquin Street, Fresno, California, which is located in the county where the mailing described below took place.

I am readily familiar with the business practice at my place of business for collection and processing of correspondence for mailing with the United States Postal Service. Correspondence so collected and processed is deposited with the United States Postal Service that same day in the ordinary course of business.

On **November 9, 2007**, at Fresno, California, I served the within **CIVIL COVER SHEET; SUMMONS; COMPLAINT FOR DECLARATORY RELIEF; PLAINTIFF'S CERTIFICATION OF INTERESTED ENTITIES OR PERSONS; CASE MANAGEMENT CONFERENCE ORDER; WELCOME TO THE U.S. DISTRICT COURT PACKET; NOTICE OF AVAILABILITY OF MAGISTRATE JUDGE; STIPULATION AND [PROPOSED] ORDER SELECTING ADR PROCESS; ECF REGISTRATION INFORMATION HANDOUT** as follows:

☐ by personal delivery of a true copy thereof

☒ by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid in the United States at Fresno, California

☐ by telefax of a true copy thereof

addressed as follows:

Long Term Disability Insurance Plan for the  
Transport Workers Union Workers of America,  
AFL-CIO Employees of American Airlines  
c/o: Transport Union of America  
80 W. End Ave.  
New York, NY 10023-6301

\_\_ (State) I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

X (Federal) I declare that I am employed in the office of a member of the bar of this court at whose direction the service was made.

Executed on **November 9, 2007**, at Fresno, California.

  
Jill A. Fulkes